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APPLICANTS
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**** CONTINUING DATA *******
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**** FOREIGN APPLICATIONS *******

**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****
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Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and /JOSEPH B BALDORI Examiner's Signature		Initials	AUSTRALIA	2	16	2

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TITLE
 Poker Game Method and Playing Area

FILING FEE RECEIVED 1790	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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